

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2008
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

| | |
|--------------------|------------|
| Application Number | 10/736,905 |
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Filed December 17, 2003

For DIGITAL CONTENTS DISTRIBUTING SYSTEM AND DISTRIBUTING METHOD

Art Unit 2154

Examiner W. T. Lin

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | Fee | Small Entity Fee | |
|--|--------|------------------|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ 460.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ _____ |

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to
Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee
Transmittal Form (PTO/SB/17) is attached to this
submission in duplicate.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 31,942

☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

Alex Cature
Signature

Signature

August 26, 2008

Date _____

Alex Chartove

(703) 760-7744

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.